

REPORTING CNA WORK TO THE REGISTRY

ndividuals who were in "active" status on the state's Direct Care Worker Registry on or after January 1, 2006, can maintain that status if the individual has been paid for nursing-related duties during the previous 24 months. Certified nurse aide (CNA) work in an assisted living program (ALP) qualifies the individual to remain on active status.

Prior to January 1, 2006, if a CNA worked as a home health aide or in an ALP, he/she could not use that employment to maintain active status on the Direct Care Worker Registry. In order to use employment in an ALP toward maintaining active status, a CNA must have been active on the registry on January 1, 2006. The change in policy will not be applied retroactively. The Department of Inspections and Appeals indicates that each employment submission will be considered on a case-by-case basis.

ALPs that do not submit quarterly reports of employment for CNAs working in their program who wish to retain their active status on the Direct Care Worker Registry can be given a regulatory insufficiency.

Care at many affordable ALPs is provided through a home health agency. The home health agency would be required to report work in the assisted living program only for CNAs who are active on the registry. They are not required to report time for uncertified employees.

Employers should ask CNAs if they are currently active on the registry and if they wish to remain so. Information and forms for reporting CNA work may be obtained by calling Greg DeMoss at the Direct Care Worker Registry at 515-281-4077.

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DO YOU NEED A BINGO LICENSE?

nder the Department of Inspections and Appeals (DIA) administrative rules, a tax-exempt organization may conduct BINGO without a license only if the following conditions are met: participants in the BINGO game are not charged to enter the premises; participants are not charged to play; only donated prizes will be awarded; and the

BINGO game is played as an activity and not as a fundraising event.

According to Julie Pike of DIA's Social and Charitable Gambling Unit, any assisted living program that is charging for BINGO, even if it is through a monthly activity fee, would not meet the gambling license exemption criteria and would be required to hold a BINGO license.

If participation in BINGO is contingent upon paying a monthly board fee, or you are charging a per-activity fee for BINGO, your program must hold a BINGO license.

For information on how to apply for a BINGO license, contact Julie at 515-281-6848, or by e-mail at jpike@dia.state.ia.us.

Regulatory Reminders

Activity Programming

Does your activity programming reflect individual differences in age, health status, sensory deficits, lifestyle, ethnic and cultural beliefs, religious beliefs, values, experiences, needs, interests, abilities and skills by providing opportunities for a variety of types and levels of involvement? If not, your program is out of compliance with assisted living rules (321-25.39(231)).

See correction from April "Regulatory Reminders" on page 3.

DOES YOUR AL PROGRAM HAVE AN OMPA?



LIFE SAFETY TIPS FOR AL PROVIDERS

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mart managers and facility engineers know that a checklist specifically designed for their buildings must be developed to ensure adequate operation and maintenance is performed. Without the list and specific times to conduct the operation and maintenance "audits," things sometimes just don't get done. An effective checklist includes audits of the site, building envelope, building common areas, plumbing, electrical, and mechanical systems, sprinklers, fire alarms, smoke detectors, strobe and emergency lighting and fire extinguishers. The following is a list of items to keep in mind when developing your operation and maintenance plan of action (OMPA).

1 Incorporate troubleshooting and preventative criteria with specific dates for conducting these important audits.

2 Utilize your predetermined communication tools to prioritize operation and maintenance activities.

Develop a seasonal plan that is realistic and conducted with specific dates for completing the activities.

Utilize realistic approaches to operations and maintenance. It is not always a good idea to do all the work internally.

Have a predetermined amount that can be spent without management approval.

ldentify all emergency conditions that could occur and create a proactive plan of action should they occur. ("Call management " is not a plan of action.)

Develop and document a strategy to identify and prevent machinery failure.

8 Develop a safe practices plan for all work activities and ensure proper safety equipment is utilized.

Develop signage for oxygen use and specific procedures for storage, handling and resident use.

Develop a plan to identify and prevent leakage, including recognition and sources for both internal and external sites.

11 Develop a plan to lubricate equipment, vehicles, doors and windows.

12 Develop a plan to attack corrosion and rust before it occurs.

Develop a plan to ensure that all filters are changed per manufactures' instructions to prolong the life of the equipment and improve efficiency.

14 Develop a plan to protect all electronic equipment and communications from lightening.

Keep a supply of critical parts for system failures such as plumbing, electrical, mechanical, sprinkler, fire alarm, smoke detection, strobe, emergency lighting and door hardware.

Develop a list of all contractors and equipment manufacturers who can provide specific assistance on equipment and systems utilized within your facility. Keep the list updated.

Maintain a service log on all equipment repairs performed and required maintenance, such as changing filters and servicing equipment.

18 Create a list of all tools to keep on hand, as well as testing equipment, such as ground fault, methane, natural gas and carbon monoxide.

19 Implement a plan to label everything mechanical, electrical and plumbing to aid in future repairs.

Develop a records management plan that ensures proper records will be maintained and accessible in an emergency for all sites, buildings, systems and equipment.

Develop a plan to operate all valves such as water main, sprinkler, plumbing and main gas line.

22 Develop a purchase plan to obtain cleaning supplies in bulk.

Develop a plan to survey all parking, sidewalks and common outdoor surfaces for tripping hazards.

Purchase a vehicle that has the ability to haul parts and contain tools in a secure place. Advertising shows residents that operations and maintenance is handled professionally.

Develop a plan to ensure that the little things that negatively affect people are taken care of daily. Pick up garbage, keep common areas clean, including drapes, blinds, switch covers, sinks, common toilets, handrails, light fixture globes, windows, door hardware, central station surfaces and contents, elevator controls, laundry equipment, garbage chutes and garbage containers.

Safety Reminders

- Don't forget to update your MSDS binder if you add a new cleaning product to your inventory.
- Check air-conditioners to ensure that the compressor does not have debris blocking proper operation and remove all covers.

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DEMENTIA TRAINING RESOURCE

he National Center for Assisted Living has established a unique relationship with Senior Living University to offer assisted living providers The Alzheimers/Dementia Care Guide. The quide contains written materials that are presented in short modules that are estimated to take a staff member 15 to 30 minutes to complete. Materials, which contain 10 hours of coursework, are designed to communicate clearly and to maximize retention. Review questions are provided as reinforcement throughout the course with a final exam that reviews the entire course. Topics include:

- Your Role as an Assisted Living Caregiver
- Understanding Alzheimer's Disease and Related Disorders
- Providing Care for Confused Residents
- Communication Skills for Residents With Alzheimer's Disease
- Supporting Family Members
- Care for the Caregiver

Assisted living providers who are providing care to five or more ten-

ants who score at four or above on the global deterioration scale are considered to be a dementia-specific program. As such, all personnel employed by or contracting with the program must receive a minimum of six hours of dementia-specific education and training prior to or within 90 days of employment or the beginning date of the contract.

Direct care staff must then receive at least six hours of dementia-specific continuing educational annually. Staff not involved in direct care must receive at least two hours of continuing education annually.

Members of the lowa Center for Assisted Living can purchase the training manual for \$140. The cost for non-members is \$165. Orders for the Alzheimer's/Dementia Care Guide (product #6920) can be placed by calling NCAL at 800-321-0343.

Assisted Living rules identify the elements that must be included in dementia-specific education for program personnel. Education should contain all topics listed in AL administrative rules (321—25.34(2)).

Autonomy & Independence: What do they mean to you?

When we talk about assisted living philosophy, many times we use the words, "independence," and "autonomy." But what do these words really mean to tenants? The Coalition of the Institutionalized and Disabled and the Nursing Home Community Coalition of New York State have created a helpful resource to use as a training guide and to facilitate discussion about these concepts with direct care staff. Find a link to the document, "The Challenge of Assisted Living: Ideas for Direct Care Staff," at www.ifahome.com. Click "Housing Programs," and then "Affordable Assisted Living." Scroll to the bottom of the page and choose the document under "Training Resources." The information is provided free of charge and can be reproduced and used as a staff education tool.

Correction from April 2006 AL Advisor

In the "Regulatory Reminders" section of the April 2006 AL Advisor, programs were advised that no more than four hours should pass between meals/ snacks in assisted living. This is a requirement in Adult Day Programs but it is not a requirement in assisted living. Tenant choice and autonomy prevail when it comes to meals and snacks. We apologize for this error.

SIGNATURES & SERVICE PLANS

Then a tenant requires personal or health-related care, a preliminary service plan must be created prior to occupancy. The plan must be updated within 30 days of occupancy, and as needed, but not less than annually, by a multidisciplinary team that consists of no fewer than three individuals, including a health care professional and other staff appropriate to meet the needs of the tenant. Assisted living rules define a "health care professional" as physician, physician assistant, registered nurse, or advanced nurse practitioner licensed through the Department of Public Health.

Previous assisted living rules also required the service plan to be signed by a "human service professional." Many programs employed a social work consultant to participate in the development of service plans, in order to meet this requirement. Some programs may be unaware that the requirement to obtain the signature of a human service professional was changed.

Although programs are no longer required to have service plans signed by a human service professional, the presence of a social worker for service planning brings another level of expertise to the multidisciplinary team. It is very important to include at least one member of the direct care staff in the service planning process. These staff members have an intimate knowledge of the likes and dislikes of tenants, as well as the actual care that is being provided on a day-to-day basis.

And, of course, don't forget to include the tenant in the service planning process and obtain his/her signature on the service plan. The service plan is a blueprint for delivering the care and services that are requested by the tenant.

Requirements regarding service plans are found in 321, Chapter 25.28 (231C).

PUBLISHED BY THE IOWA FINANCE AUTHORITY

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The Iowa Finance Authority is committed to providing opportunities for individuals and organizations to expand housing opportunities to low and moderate income families and individuals. Jenny Knust, Affordable Assisted Living Coordinator, serves as a technical advisor to programs seeking to serve low to moderate income seniors in the assisted living environment. The position is funded by a grant from the US Department of Agriculture, Rural Community Development Initiative. This publication is designed to serve as a resource for RCDI grant recipient organizations and others who are developing and/or managing affordable assisted living programs.

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WWW.ifahome.com
(look under "Senior Living," and
"Affordable Assisted Living")

EDUCATION IS ESSENTIAL

ICAL Offers AL Management Course

egulatory compliance, marketing, customer service, and life safety issues are but a few of the many issues that directors must address every day in order to operate a quality assisted living program. But many times it is difficult to find educational courses designed to improve knowledge and skills in these areas.

The lowa Center for Assisted Living (ICAL) has developed a 40-hour continuing education course designed to define excellence in assisted living administration. The focus of the course is to identify the essential components of a well-balance assisted living program. It is designed to prepare participants for developing services and procedures that reflect assisted living values and compliance with certification rules.

The two part-course covers such topics as:

AL philosophy & trends

- Personnel management
- Health services in a social model
- Nutrition & food handling
- Activities
- Budgeting
- Customer Service
- Marketing
- Resident rights
- Serving clients with dementia
- Mental illness
- Crisis planning
- Hospice in AL
- HCBS waiver
- Life safety
- OSHA
- AL regulatory compliance

AL faculty members are chosen for their expertise and knowledge to ensure that the program is stimulating and challenging.

The program is approved for 40 hours of CEU credit for nursing

home administrators and 4.8 CEUs for nurses. It meets the 40-hour core of knowledge relevant to assisted living administration management requirements for the American College of Health Care Administrators. Participants may also qualify for college credits through the Des Moines Area Community College.

The two-year certification, granted after completion of the course and a score of 85 percent or higher on the post-test, can be renewed by obtaining 10 CEUs in the field of assisted living per year from ICAL.

The course, separated into two three-days sessions, will be held July 25, 26, and 27, and August 15, 16, and 17 at the ICAL office at 6750 Westown Parkway in West Des Moines. Participants can register for the course by calling Georgene Olson at ICAL at 800-422-3106. Seating is limited, and registrations are accepted on a first-come, first-served basis.